

AGREEMENT BETWEEN
LAKE COUNTY, FLORIDA
AND
HARTFORD LIFE AND ACCIDENT INSURANCE COMPANY
FOR
INSURANCE, LIFE & ACCIDENTAL DEATH AND DISMEMBERMENT (AD&D)
(RFP #16-0027)

This is an Agreement between Lake County, Florida, a political subdivision of the State of Florida, hereinafter referred to as the COUNTY, by and through its Board of County Commissioners, and Hartford Life and Accident Insurance Company, a foreign company authorized to do business in the State of Florida, its successors and assigns, hereinafter referred to as the CONSULTANT.

Recitals

WHEREAS, the COUNTY has publicly submitted a Request for Proposal (RFP), #16-0027, for procurement of services from qualified firms, organizations or individuals to provide group term life insurance and accidental death and dismemberment (AD&D) coverage; and

WHEREAS, the CONSULTANT is quailed desires to provide the aforementioned services on behalf of the County subject to the terms of this Agreement; and

WHEREAS, the COUNTY did hold negotiation meetings in which the COUNTY and the CONSULTANT did reach mutual agreement as to the terms and conditions of such services; and

NOW, THEREFORE, IN CONSIDERATION of the mutual terms, understandings, conditions, premises, covenants and payment hereinafter set forth, and intending to be legally bound, the parties hereby agree as follows:

Article 1. Recitals

- 1.1** The foregoing recitals are true and correct and incorporated herein by reference.

Article 2. Purpose

- 2.1** The purpose of this Agreement is for the CONSULTANT to provide group term life insurance and accidental death and dismemberment (AD&D) insurance services to COUNTY employees.

Article 3. Scope of Professional Services

- 3.1** On the terms and conditions set forth in this Agreement, the COUNTY hereby engages the CONSULTANT to perform the following services in accordance with the Scope of Services and the proposed plan attached hereto and incorporated herein as **Attachment A**:

- Provide group term life insurance and accidental death and dismemberment (AD&D) insurance services to individual COUNTY employees

3.2 This Agreement shall be effective October 1, 2016, and shall continue through September 30, 2019, unless terminated as set forth herein. The COUNTY reserves the sole right to renew this Agreement for two (2) successive one (1) year periods. Continuation of this Agreement beyond the initial term will be effective annually on October 1, if agreed to by both parties.

3.3 The CONSULTANT shall coordinate and work with any other consultants retained by the COUNTY. The CONSULTANT acknowledges that nothing herein shall be deemed to preclude the COUNTY from retaining the services of other persons or entities undertaking the same or similar services as those undertaken by the CONSULTANT or from independently developing or acquiring materials or programs that are similar to, or competitive with, the services provided under this Agreement.

3.4 The CONSULTANT shall not solicit individual employees to sign up for services unless such solicitation is pre-approved by COUNTY.

Article 4. Payment

4.1 The CONSULTANT agrees to provide group term life insurance and accidental death and dismemberment (AD&D) insurance services to individual COUNTY employees in accordance with this Agreement at the rates detailed in **Attachment B**, attached hereto and incorporated herein by reference. The rates agreed to herein shall include all expenses. The COUNTY shall not be responsible for any cost or fee other than those agreed upon herein. The monthly fee(s) for coverages shall be paid by the individual employee.

4.2 Invoices shall be submitted in duplicate to Mariam Naas, Human Resources Department, P.O. Box 7800, Tavares, Florida 32778 on a monthly basis. Each invoice shall contain the RFP number and a detailed description of services and fees. The COUNTY shall make payment on all invoices as required in accordance with the Florida Prompt Payment Act, sections 218.70 through 218.79, Florida Statutes.

Article 5. County Responsibilities

5.1 The COUNTY shall promptly review the deliverables and other materials submitted by the CONSULTANT and provide direction to the CONSULTANT as needed. The COUNTY shall designate one County staff member to act as its administrator and/or spokesperson.

5.2 The COUNTY shall pay the CONSULTANT in accordance with Article 4 above.

Article 6. Special Terms and Conditions

6.1 Qualifications. The CONSULTANT shall have obtained at least the minimum thresholds of education and professional experience required by the Florida Statutes.

6.2 Termination. This Agreement may be terminated by the COUNTY upon thirty (30) days advance written notice to the other party; but if any work or service/Task hereunder is in progress but not completed as of the date of termination, then this Agreement may be extended upon written approval of the COUNTY until said work or service(s)/Task(s) is completed and accepted.

A. Termination for Convenience. In the event this Agreement is terminated or cancelled upon the request and for the convenience of the COUNTY with the required 30 day advance written notice, the COUNTY shall reimburse the CONSULTANT for actual work satisfactorily completed.

B. Termination for Cause. Termination by the COUNTY for cause, default, or negligence on the part of the CONSULTANT shall be excluded from the foregoing provision. Termination costs, if any, shall not apply. The 30-day advance notice requirement is waived in the event of termination for cause.

C. Termination Due to Unavailability of Funds in Succeeding Fiscal Years - When funds are not appropriated or otherwise made available to support continuation of performance in a subsequent fiscal year, this Agreement shall be canceled and the CONSULTANT shall be reimbursed for the reasonable value of any non-recurring costs incurred but not amortized in the price of the supplies or services/Tasks delivered under this Agreement.

6.3 Subletting of Contract. This Agreement shall not be sublet except with the written consent of the COUNTY's Procurement Services Director. No such consent shall be construed as making the COUNTY a party to the subcontract or subjecting the COUNTY to liability of any kind to any subcontractor. No subcontract shall under any circumstances relieve the CONSULTANT of liability and obligations under this Agreement and all transactions with the COUNTY must be through the CONSULTANT.

6.4 Insurance. The CONSULTANT shall provide and maintain during the entire term of this Agreement insurance in the following types and limits with a company or companies authorized to do business in the State of Florida. CONSULTANT shall not commence work under the Agreement until COUNTY has received an acceptable certificate or certificates of insurance evidencing the required insurance, which is as follows:

(X) General Liability

(X) Each Occurrence/General Aggregate	\$1,000,000
(X) Products-Completed Operations	\$1,000,000
(X) Personal & Adv. Injury	\$1,000,000
(X) Fire Damage	\$50,000
(X) Medical Expense	\$5,000
(X) Contractual Liability	\$300,000

(X) Automobile liability insurance, including owned, non-owned and hired autos with the following minimum limits and coverage:

Combined Single Limit	\$300,000
or	
Bodily Injury (per person)	\$100,000 (per accident)
Property Damage	\$100,000

(X) **Lake County, A Political Subdivision Of The State Of Florida, And The Board Of County Commissioners**, shall be name as additional insured as their interest may appear on the general liability policy.

(X) Workers' compensation insurance in accordance with Florida Statute, Chapter 440, and/or any other applicable law requiring workers' compensation (Federal, maritime, etc). If not

required by law to obtain workers compensation insurance, the CONSULTANT must provide a notarized statement that if they are injured, they will not hold the Lake County Board of County Commissioners responsible for any payment or compensation.

(X) Professional Liability and/or specialty insurance (medical malpractice, engineers, architect, consultant, environmental, pollution, errors and omissions, etc.) insurance as applicable, with minimum limits of \$100,000 and annual aggregate of \$2,000,000.

(X) Certificates of insurance shall provide for a minimum of thirty (30) days prior written notice to the COUNTY of any change or cancellation of the required insurance.

(X) Certificates of insurance shall identify the RFP #16-0027 in the Description of Operations section of the Certificate.

(X) CONSULTANT shall be responsible for subcontractors and their insurance.

(X) The Certificate holder shall be: LAKE COUNTY, A POLITICAL SUBDIVISION OF THE STATE OF FLORIDA, AND THE BOARD OF COUNTY COMMISSIONERS, P.O. BOX 7800, TAVARES, FL 32778-7800

The COUNTY shall be exempt from, and in no way liable for, any sums of money which may represent a deductible in any insurance policy. The payment of such deductible shall be the sole responsibility of the CONSULTANT and/or subcontractors providing such insurance.

6.5 Indemnity. The CONSULTANT shall indemnify and hold the COUNTY and its agents, officers, commissioners or employees harmless for any damages resulting from failure of the CONSULTANT to take out and maintain the above insurance. Additionally, the CONSULTANT agrees for good and valuable consideration in the amount of ten dollars (\$10.00) to indemnify, and hold the Board of County Commissioners, Lake County, Florida, and its officers, commissions, employees and agents free and harmless from and against any and all losses, penalties, damages, settlements, costs, charges, professional fees or other expenses or liabilities resulting from the negligent act, error or omission of the CONSULTANT, its agents, employees or representative, in the performance of the CONSULTANT's duties set forth in this Agreement.

6.6 Independent Contractor.

A. The CONSULTANT shall provide the services required herein strictly under a contractual relationship with the COUNTY and is not, nor shall be, construed to be an agent, employee, joint venturer, or partner of the COUNTY. As an independent contractor the CONSULTANT shall pay any and all applicable taxes required by law; shall comply with all Federal, State and local statutes, including but not limited to, the Fair Labor Standards Act, the Americans with Disabilities Act, the Federal Civil Rights Act, and any and all relevant employment laws. The CONSULTANT shall be responsible for all income tax, FICA, and any other withholdings from its employees' or subcontractors' wages or salaries. Benefits for same shall be the responsibility of the CONSULTANT including, but not limited to, health and life insurance, mandatory social security, retirement, liability/risk coverage, and worker's and unemployment compensation.

B. The CONSULTANT shall hire, compensate, supervise and terminate members of its work force. The CONSULTANT shall direct and control the manner in which work is performed

including conditions under which the individuals will be assigned duties, how individuals report, and the hours individuals will work.

C. The CONSULTANT acknowledges and agrees that the CONSULTANT shall not be provided special space, facilities or equipment by the COUNTY to perform any of the duties required by this Agreement nor shall the COUNTY pay for any business, travel, or any other contract performance expenses not specifically set forth in this Agreement.

D. The CONSULTANT shall not be exclusively bound to the COUNTY and may provide services to other private and public entities as long as it is not in conflict and does not provide a conflict of interest with the services to be performed for the COUNTY.

6.7 Retaining Other Consultants. Nothing herein shall be deemed to preclude the COUNTY from retaining the services of other persons or entities undertaking the same or similar services as those undertaken by the CONSULTANT or from independently developing or acquiring materials or programs that are similar to, or competitive with, the services provided under this Agreement.

6.8 Accuracy. The CONSULTANT is responsible for the professional quality, technical accuracy, timely completion and coordination of all the services furnished hereunder. The CONSULTANT shall, without additional compensation, correct or revise any errors, omissions or other deficiencies in its designs, drawings, reports or other services.

6.9 Public Records/Copyrights.

A. All electronic files, audio and/or video recordings, and all papers pertaining to any activity performed by the CONSULTANT for or on behalf of the COUNTY shall be the property of the COUNTY and will be turned over to the COUNTY upon request. In accordance with Chapter 119, Florida Statutes, each file and all papers pertaining to any activities performed for or on behalf of the COUNTY are public records available for inspection by any person even if the file or paper resides in the CONSULTANT's office or facility. The CONSULTANT shall maintain the files and papers for not less than five (5) complete calendar years after the Project has been completed or terminated, or in accordance with any grant requirements, whichever is longer. Prior to the close out of this Agreement, the CONSULTANT shall appoint a records custodian to handle any records request and provide the custodian's name and telephone number(s) to the Contracting Officer.

B. Any copyright derived from this Agreement shall belong to the author. The author and the CONSULTANT shall expressly assign to the COUNTY nonexclusive, royalty free rights to use any and all information provided by the CONSULTANT in any deliverable and/or report for the COUNTY's use which may include publishing in the COUNTY documents and distribution as the COUNTY deems to be in the COUNTY's best interests. If anything included in any deliverable limits the rights of the COUNTY to use the information, the deliverable shall be considered defective and not acceptable and the CONSULTANT will not be eligible for any compensation.

C. Pursuant to Section 119.0701, Florida Statutes, the CONSULTANT shall comply with the Florida Public Records' laws, and shall:

1. Keep and maintain public records required by the COUNTY to perform the services identified herein.

2. Upon request from the COUNTY's custodian of public records, provide the COUNTY with a copy of the requested records or allow the records to be inspected or copied within a reasonable time at a cost that does not exceed the cost provided for by law.
3. Ensure that public records that are exempt or confidential and exempt from public records disclosure requirements are not disclosed except as authorized by law for the duration of the contract term and following completion of the contract if the CONSULTANT does not transfer the records to COUNTY.
4. Upon completion of the contract, transfer, at no cost, to the COUNTY all public records in possession of the CONSULTANT or keep and maintain public records required by the COUNTY to perform the service. If the CONSULTANT transfers all public records to the COUNTY upon completion of the contract, the CONSULTANT shall destroy any duplicate public records that are exempt or confidential and exempt from public records disclosure requirements. If the CONSULTANT keeps and maintains public records upon completion of the contract, the CONSULTANT shall meet all applicable requirements for retaining public records. All records stored electronically must be provided to the COUNTY, upon request from the COUNTY's custodian of public records, in a format that is compatible with the information technology systems of the COUNTY.

IF THE CONSULTANT HAS QUESTIONS REGARDING THE APPLICATION OF CHAPTER 119, FLORIDA STATUTES, TO THE CONSULTANT'S DUTY TO PROVIDE PUBLIC RECORDS RELATING TO THIS CONTRACT, CONTACT THE CUSTODIAN OF PUBLIC RECORDS AT LAKE COUNTY PROCUREMENT SERVICES, 352-343-9839, 315 W. MAIN STREET, TAVARES, FLORIDA 32778, sdugan@lakecountyfl.gov.

6.10 Public Entity Crimes. A person or affiliate who has been placed on the convicted vendor list following a conviction of a public entity crime may not be awarded or perform work as a contractor, supplier, subcontractor, or consultant under a contract with any public entity in excess of the threshold amount provided in Florida Statutes, section 287.017 for Category Two for a period of thirty-six (36) months from the date of being placed on the convicted vendor list. The CONSULTANT certifies that it is not now on the convicted vendor list, and acknowledges that if the CONSULTANT is later placed on such list, the COUNTY shall have the option to terminate this Agreement.

6.11 Right to Audit. The County reserves the right to require the CONSULTANT to submit to an audit by any auditor of the COUNTY's choosing. The CONSULTANT shall provide access to all of its records, which relate directly or indirectly to this Agreement, subject to law prohibiting disclosure or permitting non-disclosure, at its place of business during regular business hours. The CONSULTANT shall retain all records pertaining to this Agreement and upon request make them available to the COUNTY for three (3) years following expiration of the Agreement. The CONSULTANT agrees to provide such assistance as may be necessary to facilitate the review or audit by the COUNTY to ensure compliance with applicable accounting and financial standards.

6.12 Furnishing of Materials and Labor. The CONSULTANT shall, for the consideration set forth herein, and at its sole cost and expense, as an independent contractor, provide all labor, materials,

equipment, tools, supplies and incidentals necessary to perform the Scope of Services, including covering all costs of producing, printing, and mailing/distributing marketing and administrative supplies including Certificates and Policies to covered individuals. Agent shall additionally dedicate a main contact person and provide a representative to attend up to six (6) Client committee and/or employee meetings annually, as requested by the Client.

6.13 Standard of Care. The CONSULTANT shall furnish, provide or fulfill its obligations under this Agreement in a professional manner to the reasonable satisfaction of the duly authorized representatives of the COUNTY, who shall have, at all times, full opportunity to monitor the services performed under this Agreement. At all times during the term of this Agreement, the Agent shall maintain an AM Best Rating of "A" or higher. A rating of "A-" or lower will not be acceptable.

6.14 Additional Information. The CONSULTANT, at the request of the COUNTY, shall further provide to the COUNTY such other information as the COUNTY may reasonably request from time to time. Further, the CONSULTANT shall provide the COUNTY with online access to view claims status, eligibility status, and the ability to run reports as necessary.

6.15 The CONSULTANT shall:

A. Utilize the U.S. Department of Homeland Security's E-Verify system to verify the employment eligibility of all new employees hired by the CONSULTANT during the term of this Agreement; and

B. Expressly require any contractor and subcontractors performing work or providing services to the CONSULTANT pursuant to this Agreement to likewise utilize the U.S. Department of Homeland Security's E-Verify system to verify the employment eligibility of all new employees hired by the subcontractor during the contract term.

6.16 Key Personnel. The CONSULTANT agrees that each person listed or referenced in the qualifications package shall be available to perform the services described herein for the COUNTY barring illness, accident, or other unforeseeable events of a similar nature in which case the CONSULTANT must be able to promptly provide a qualified replacement. In the event the CONSULTANT desires to substitute personnel, the CONSULTANT shall propose a person with equal or higher qualifications and each replacement person is subject to prior written approval of the COUNTY. In the event the requested substitute is not satisfactory to the COUNTY and the matter cannot be resolved to the satisfaction of the COUNTY, the COUNTY reserves the right to terminate this Agreement.

6.17 Non-Waiver. No delay by either party in enforcing any covenant or right hereunder shall be deemed a waiver of such covenant or right, and no waiver of any particular provision hereof shall be deemed as waiver of any other provision or a continuing waiver of such particular provision, and except as so expressly waived, all provisions hereof shall continue in full force and effect.

6.18 Third Party Beneficiaries. There are no third party beneficiaries of this Agreement, either intended or implied.

Article 7. General Conditions

- 7.1 This Agreement is made under, and in all respects shall be interpreted, construed, and governed by and in accordance with, the laws of the State of Florida. Venue for any legal action resulting from this Agreement shall lie in Lake County, Florida.
- 7.2 Neither Party may assign any rights or obligations under this Agreement to any other party unless specific written permission from the other party is obtained.
- 7.3 The captions utilized in this Agreement are for the purposes of identification only and do not control or affect the meaning or construction of any of the provisions hereof.
- 7.4 This Agreement shall be binding upon and shall inure to the benefit of each of the parties and of their respective successors and permitted assigns.
- 7.5 This Agreement may not be amended, released, discharged, rescinded or abandoned, except by a written instrument duly executed by each of the parties hereto. However, change orders may be executed in accordance with the COUNTY's purchasing policies and procedures.
- 7.6 The failure of any party hereto at any time to enforce any of the provisions of this Agreement will in no way constitute or be construed as a waiver of such provision or of any other provision hereof, nor in any way affect the validity of, or the right thereafter to enforce, each and every provision of this Agreement.
- 7.7 During the term of this Agreement CONSULTANT assures COUNTY that it is in compliance with Title VII of the 1964 Civil Rights Act, as amended, and the Florida Civil Rights Act of 1992, in that CONSULTANT does not on the grounds of race, color, national origin, religion, sex, age, disability or marital status, discriminate in any form or manner against CONSULTANT employees or applicants for employment. CONSULTANT understands and agrees that this Agreement is conditioned upon the veracity of this statement of assurance.
- 7.8 The CONSULTANT shall at all times comply with all Federal, State and local laws, rules and regulations.
- 7.9 The invalidity or unenforceability of any particular provision of this Agreement shall not affect the other provisions hereof, and this Agreement shall be construed in all respects as if such invalid or unenforceable provisions were omitted.
- 7.10 Wherever provision is made in this Agreement for the giving, service or delivery of any notice, statement or other instrument, such notice shall be in writing and shall be deemed to have been duly given, served and delivered, if delivered by hand or mailed by United States registered or certified mail or sent by facsimile, addressed as follows:

If to CONSULTANT:

David Kryzanski, Vice President
Hartford Life and Accident Insurance Company
Two Urban Centre
4890 West Kennedy Blvd, Suite 830
Tampa, FL 33609

If to COUNTY:

County Manager
P.O. Box 7800
Tavares, Florida 32778-7800

cc: Robert Anderson, Director
P.O. Box 7800
Tavares, Florida 32778

Each party hereto may change its mailing address by giving to the other party hereto, by hand delivery, United States registered or certified mail notice of election to change such address.

Agreement Between Lake County, Florida and Hartford Life and Accident Insurance Company for Insurance, Life & Accidental Death and Dismemberment (AD&D); (RFP #16-0027)

Article 8. Scope of Agreement

8.1 This Agreement is intended by the parties hereto to be the final expression of their Agreement, and it constitutes the full and entire understanding between the parties with respect to the subject hereof, notwithstanding any representations, statements, or agreements to the contrary heretofore made.

8.2 This Agreement contains the following Exhibits:

Attachment A Scope of Services
Attachment B Plan Summary/Policy

IN WITNESS WHEREOF, the parties hereto have made and executed this Agreement on the respective dates under each signature: COUNTY through its Board of County Commissioners, signing by and through its Chair and by CONSULTANT through its duly authorized representative.

CONSULTANT

By: David Kryzanski
David Kryzanski, Vice President
Hartford Life and Accident Insurance Company

This 2nd day of June, 2016.

FL License No. 91-06-0838648

COUNTY

Lake County, Florida

Sean M. Parks
Sean M. Parks, Chairman

This 5th day of July, 2016

ATTEST:

Neil Kelly
Neil Kelly, Clerk of the
Board of County Commissioners
of Lake County, Florida

Approved as to form and legality:

Melanie Marsh
Melanie Marsh, County Attorney

ATTACHMENT A: SCOPE OF SERVICES

Section 1.1 General Information and Requirements

The COUNTY requested proposals for Group Term Life and AD&D insurance. The COUNTY currently self-administers the plan (maintains employee records and self-bills). At a minimum, the CONSULTANT must match the current certificates and amendments for the products specified. Any deviations from the current coverage levels or provisions must be clearly disclosed.

The COUNTY participates in the Florida Retirement System (FRS). Employee eligibility is based on thirty (30) hours of work per week.

Relationship of County Agencies

The following table lists the participating agencies under the Lake County Government contract:

Agency Name	Agency Name
Board of County Commissioners	Clerk of Courts
Lake Emergency Medical Services (EMS)	Tax Collectors Office
Property Appraisers Office	Lake-Sumter Metropolitan Planning Org. (MPO)
Lake County Water Authority	Supervisor of Elections

Section 2.1 The COUNTY is seeking the following services:

1. The term of the initial contract shall be October 1, 2016 through September 30, 2019. The COUNTY shall have the option to extend the Agreement for no more than two (2) additional one (1) year terms with mutual agreement of both parties.
2. The CONSULTANT will have an AM Best Rating of "A" or higher. A rating of "A-" or lower will not meet the COUNTY's qualifications.
3. The CONSULTANT shall have at least five (5) years experience offering Life and AD&D products.
4. The CONSULTANT shall provide references for five (5) current public sector groups.
5. The CONSULTANT shall be licensed to transact the appropriate insurance products for at least five (5) years in the State of Florida.
6. The CONSULTANT shall be compliant with all State and Federal requirements.

7. The CONSULTANT shall dedicate personnel to be the main contact for managing account relationships.
8. The CONSULTANT shall provide a representative to attend up to six (6) Client committee and employee meetings, annually, as requested.
9. The CONSULTANT shall incur all costs of producing, printing and mailing/distributing marketing and administrative supplies including Certificates and Policies to covered individuals.
10. The CONSULTANT shall provide the Client with online access to view claims status, eligibility status and be able to run reports.
11. The CONSULTANT agrees that the Client will have no minimum participation requirements for voluntary (employee paid) products.
12. The CONSULTANT agrees to offer a modified open enrollment for benefits effective October 1, 2016 and each year after that allows employees Life and AD&D coverage in annual \$10,000 dollar increments up to the guarantee issue maximums and without Evidence of Insurability requirements proposed.
13. The CONSULTANT agrees to cover current employees and dependents and agrees to cover all actively at work employees and dependents on a "no loss, no gain" basis.
14. The CONSULTANT agrees to guarantee proposed rates for a minimum of three (3) years.

Section 3.1 Benefits Covered by this Agreement

Section 3.1.1 Group Term and AD&D

- Basic Life (Employer paid)
- Paid by the Client for all full-time, permanent employees.
- Cancels at retirement.
- Benefit (Guaranteed Issue) is one (1) times Basic Annual Earnings as of October 1st of each year; rounded to the next higher \$1,000 if not already a multiple of \$1,000. Does not include commissions, bonuses, overtime pay or any other extra compensation. Insurance increases or decreases as a result of a change in salary or class will take effect on the October 1st following the date of change if Actively at Work. For new hires the amount is based on the Basic Annual Earnings as of the date of hire.
- Maximum Benefit is \$200,000.
- The amount of Life and AD&D insurance reduces to 65% at age 65-69, with a further reduction to 50% at age 70 and over.
- Waiver of Premium is included.

- Conversion Privilege is included.
- Accelerated Death Benefit included.

Section 3.1.2 Optional Employee and Dependent Life (Employee Paid)

- 100% employee paid
- AD&D available for employee, spouse and children
- Optional Employee Plan Maximum is Lesser of 5xs annual earnings or \$300,000.
- Guaranteed Issue \$100,000.
- Accelerated Death Benefit included.
- Survivor financial counseling included.
- Waiver of Premium included.
- Spouse coverage available in \$5,000 increments.
- Optional Spouse Plan Maximum is lesser of \$150,000 or 50% of the employee's elected basic and supplemental insurance combined.
- Guaranteed Issue for spouse coverage is \$25,000.
- Child (ren) coverage available at \$2,500, \$5,000, \$7,500 or \$10,000 not to exceed 50% of employee basic and voluntary coverage. Fourteen days to six months benefit is \$250.00.

Section 3.1.3 AD&D

- AD&D is an amount equal to the amount of Basic Life Insurance in force.
- Premium amount paid for Basic Life is Employer Paid.
- Premium amount equal to the Voluntary Employee or Spouse Term Life is Employee Paid.

ATTACHMENT B: PLAN SUMMARY/POLICY

**A Proposal of Employee Benefits From The Hartford
For the U.S. Employees of**

Lake County

Life, AD&D Insurance

**Presented by:
Home Office Direct**

Proposal valid until July 3, 2016

The Hartford® is The Hartford Financial Services Group, Inc. and its subsidiaries including issuing companies Hartford Life Insurance Company and Hartford Life and Accident Insurance Company. Home office is Hartford, CT.



The Hartford Delivers

The Hartford welcomes the opportunity to quote on your group benefits.

At The Hartford, we know that the health and well-being of your employees has an enormous influence on the productivity of your workforce. We understand the link between medical costs and disabilities and their impact on your company's bottom line.

The Hartford is one of the leading providers of group disability and life insurance, and has been recognized for our financial stability and integrity for over 50 years in the group benefits business. We provide unique solutions to your insurance needs while providing employees with the benefits that help make your company an attractive and motivating place to work.

The Hartford's disability claim management approach helps employees return to work and helps employers to reduce costs. Our *Ability Philosophy*, which is a core belief that people want to lead active, productive and independent lives, is central to how we conduct business.

Our life claim model is predicated on prompt and sensitive service. Our dedicated call center staff receives sensitivity training to deal with grieving claimants.

Initial and ongoing service is as important to our customers as our claims approach. That is why we put such great emphasis on our consistent, responsive and accurate service operations. The Hartford's Group Benefits Division employees bring to life our *Ability Philosophy* every day for producers, employers and employees through their deep industry knowledge, caring, and a proven ability to meet the unique needs of our customers in every interaction.

We deliver leading edge products and services, backed by a tradition of market leadership.

May 31, 2016

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Leading-Edge Products and Services

- **Ability-Focused Group Disability products** – help employers maximize work force productivity and minimize absences. The Hartford was one of the first to focus on the abilities of people with disabilities to help them return to work. We demonstrate this philosophy through our Founding Partnership with U.S. Paralympics® that promotes and supports the power of ability.
- **Flexible Benefit Solutions** - The Hartford is a leading provider of employer-paid and voluntary coverages that help employees protect their financial security during challenging times. As the market continues to shift towards voluntary coverage, The Hartford continues to invest in services and technologies that help reduce administrative burden. These capabilities, including online consumer education tools, help optimize the enrollment experience and employee engagement. By giving employees and employers options that match their financial goals, our Group Benefits account teams help provide a flexible benefits package focused on customer satisfaction.
- **A Comprehensive Portfolio of Group Life products** – help to provide financial security for life's unpredictable events. These not only help provide important benefits at time of death, but can also offer added value to employees during their lifetime and provide assistance to their beneficiaries.
- **A Complete Line of Group Accident programs** – offer valuable accident protection for employees. Through our *Accidental Death & Dismemberment Insurance* coverage we offer worldwide protection 24 hours a day, 365 days a year, subject to policy exclusions. We also offer *Group Travel Accident Insurance* coverage for employees when traveling, which includes travel assistance benefits including emergency medical assistance provided by Europ Assistance USA, Inc, a leader in the travel assistance industry.
- **Innovative Websites** – Employer View® helps reduce plan administration time by providing employers with instant, secure access to group benefit information, including claim inquiry, medical underwriting data, electronic billing and electronic payment. The Hartford's dedicated consumer benefits website, www.TheHartfordAtWork.com, gives your employees clear and concise information and interactive tools to quickly and confidently make the right choices for their needs.

For More Information

The Hartford is pleased to provide a proposal designed to meet your specific benefit plan objectives. We believe we're uniquely qualified to be your carrier of choice and look forward to serving your group benefits needs. For more information about our products and services, please contact your Hartford representative.

May 31, 2016

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Basic Employee Life Insurance Plan

Employee Plan Summary	
Feature	Description
Class Description	All Active Full-time Employees
Employee Benefit	1 times Earnings rounded to Next higher \$1,000
Guaranteed Issue Amount	\$200,000
Maximum Benefit	\$200,000
Benefit Reduction Schedule	By 35% @ 65, By 50% Of Orig @ 70**
Employee Continuity of Coverage	Enhanced
Life Disability Provision*	Premium Waiver to Normal Retirement Age if Disabled Prior to 60
Premium Waiver Elimination Period	9 Months
Living Benefit Option (Accelerated Benefit)*	12 months Life Expectancy, 80% of benefit to Max. \$200,000
Portability Option*	Employee Only
Conversion*	Included
Occupational Death Benefit	Does Not Apply
Employee Contribution	Non-contributory
Enrollment Type	No Enrollment
Participation Requirement	100% of Eligible Employees
Number of Eligible Employees	1199

* Applies to Life only

** Reminder – Compliance with ADEA is the responsibility of the Employer. Please consult your legal counsel to determine if this cutback schedule complies with ADEA guidelines.

Employee Rate Summary			Monthly Premium
Basic Life	\$0.08 per \$1,000	\$53,516,500 Volume	\$4,281.32
Rate Guarantee: 3 Years			

May 31, 2016

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Lake County

Supplemental Employee Life Insurance Plan Option 2

Employee Plan Summary	
Feature	Description
Class Description	All Active Full-time Employees
Employee Benefit	\$10,000 Increments
Guaranteed Issue Amount	\$100,000
Minimum Benefit	\$10,000
Maximum Benefit	\$300,000
Employee Continuity of Coverage	Standard
Life Disability Provision*	Premium Waiver to Normal Retirement Age if Disabled Prior to 60
Premium Waiver Elimination Period	9 Months
Living Benefit Option (Accelerated Benefit)*	12 months Life Expectancy, 80% of benefit to Max. \$300,000
Portability Option*	Portability Plus - Employee + Dependent
Conversion*	Included
Suicide Exclusion*	2 Years
Employee Contribution	Contributory
Enrollment Type	Modified Open Enrollment - Inforce Plan - 1 Increment Level Buy Up
Participation Requirement	54% of Eligible Employees
Number of Eligible Employees	1199

* Applies to Life only

Employee Rate Summary				Monthly Premium (TBD)
	Age Band	Rate per \$1,000	Volume To Be Determined (TBD)	
Supplemental Life	<25	\$0.053		
	25 - 29	\$0.057		
	30 - 34	\$0.076		
	35 - 39	\$0.086		
	40 - 44	\$0.114		
	45 - 49	\$0.171		
	50 - 54	\$0.285		
	55 - 59	\$0.504		
	60 - 64	\$0.675		
	65 - 69	\$1.207		
	70 - 74	\$1.957		
	75+	\$3.126		
Rate Guarantee: 3 Years				

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Supplemental Dependent Life Insurance Plan Option 2

Dependent Plan Summary	
Feature	Description
Spouse Benefit	Increments of \$5,000 subject to a maximum of \$150,000 (Not to exceed 50% of Employee Supplemental Life Benefit)
Spouse Guaranteed Issue Amount	\$25,000
Living Benefit Option (Accelerated Benefit)*	12 months Life Expectancy, 80% of benefit to Max. \$150,000
Child Benefit	15 Days To 6 Months \$250 6 Months To 26 years \$2,500 increments to \$10,000
Waiver of Dependent Premium*	Included. Applies if Employee Qualifies for Premium Waiver
Portability Option – Spouse/Child*	Portability Plus - Employee + Dependent
Conversion – Spouse/Child*	Included
Suicide Exclusion*	2 Years

* Applies to Life only

Spouse Rate Summary				Monthly Premium (TBD)
	Age Band	Rate per \$1,000	Volume To Be Determined (TBD)	
Supplemental Life	<25	\$0.048		
	25 - 29	\$0.057		
	30 - 34	\$0.067		
	35 - 39	\$0.086		
	40 - 44	\$0.105		
	45 - 49	\$0.152		
	50 - 54	\$0.257		
	55 - 59	\$0.409		
	60 - 64	\$0.713		
	65 - 69	\$1.178		
	70 - 74	\$1.178		
	75+	\$1.178		
Rate Guarantee: 3 Years				

Child Rate Summary			Monthly Premium
Supplemental Life			
		\$0.114 per \$1,000	
Rate Guarantee: 3 Years			

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Basic Stand Alone AD&D

Feature	Description
CLASS DESCRIPTION	All Full-Time Active Employees
BENEFIT SCHEDULE	Times Earnings Rounded: 1 times Earnings to a Maximum of \$200,000, rounded to the next Highest \$1,000
BENEFIT REDUCTION SCHEDULE* We will reduce Your Principal Sum on the premium Due Date on or next following the date You attain the designated ages in the schedule. The reduced amount will be determined by multiplying the benefit elected by the percentage shown to the right:	Matches Basic Life Schedule
EMPLOYEE CONTRIBUTION	Non-Contributory
PARTICIPATION REQUIREMENT	100% of Eligible Employees
INITIAL RATE GUARANTEE PERIOD	3 Years

Basic Rate Summary				
Coverage Category/Class	No of Lives	Rate Basis	Volume	Monthly Premium
ADD - EE	1,199	\$0.015 Per \$1,000 Employee Per Month	TBD	TBD
COMMISSION: 0%				
INITIAL RATE GUARANTEE PERIOD: 3 Years				

****Reminder - Compliance with ADEA is the responsibility of the Employer. Please consult your legal counsel to determine if this schedule complies with ADEA guidelines.**

Earnings means Your regular annual rate of pay, not counting bonuses, commissions and tips and tokens, overtime pay or any other fringe benefits or extra compensation, in effect on the date You were last Actively at Work.

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Supplemental Stand Alone AD&D

Feature	Description
CLASS DESCRIPTION	All Full-Time Active Employees
EMPLOYEE BENEFIT SCHEDULE	Increments: \$10,000 increments not to exceed 5x or \$300,000
MINIMUM BENEFIT AMOUNT	\$10,000
SPOUSE ELIGIBILITY	Spouses of Active Full Time Employees who are under age 70
SPOUSE BENEFIT SCHEDULE	Percent of Insured: 50% not to exceed \$150,000
CHILD(REN) ELIGIBILITY	Unmarried Children of Active Full Time Employees who are under age 26, or age 26 if a Full Time Student
CHILD(REN) BENEFIT SCHEDULE	Increments of \$2,500 not to exceed \$10,000 or 50% of Employee Amount
EMPLOYEE CONTRIBUTION	Contributory
PARTICIPATION REQUIREMENT	25% of Eligible Employees
NUMBER OF ELIGIBLE LIVES	1,199 Employees
INITIAL RATE GUARANTEE PERIOD	3 Years

Supplemental Rate Summary				
Coverage Category/Class	No of Lives	Rate Basis	Volume	Monthly Premium
ADD - EE	TBD	\$0.05 Per \$1,000 Employee Per Month	TBD	TBD
ADD - Spouse	TBD	\$0.03 Per \$1,000 Spouse Per Month	TBD	TBD
ADD - Child(ren)	TBD	\$0.05 Per \$1,000 Child(ren) Per Month	TBD	TBD
COMMISSION: 0%				
INITIAL RATE GUARANTEE PERIOD: 3 Years				

**Reminder - Compliance with ADEA is the responsibility of the Employer. Please consult your legal counsel to determine if this schedule complies with ADEA guidelines.

All ADD is Guarantee Issue.

Earnings means Your regular annual rate of pay, not counting bonuses, commissions and tips and tokens, overtime pay or any other fringe benefits or extra compensation, in effect on the date You were last Actively at Work.

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Qualifications and Assumptions

With this rate structure the employer may be electing to partially support employer paid coverages with the rate for the employee paid coverages. This means that premiums paid for one coverage may cover the cost of another coverage under the Plan. When we quote rates with such partial support between the employee paid and employer paid coverages we do so with the understanding that the employer and employee coverages are part of a single ERISA plan sponsored by the employer and that the employer has determined that the rate structure is consistent with information provided to employees and with its ERISA obligations. If this understanding is not accurate, please contact us.

The following are the qualifications upon which this proposal is based.
Our quote is contingent upon receipt of:

1. A Concentration of Risk form must be completed or updated for all Life and AD&D lines with 1,000+ eligible employees at the time of sale.
2. Approval for multiple increment Modified Open Enrollment in the State of FL.

All missing information must be received prior to the quote "valid until date" listed on the cover of this proposal. The quote will not be binding until all missing information is received, reviewed, and approved in writing by The Hartford.

The following are the assumptions upon which this proposal is based:

1. The effective date of this case will be October 1, 2016.
2. Proposal and rates are valid until July 3, 2016.
3. Rates assume a SIC code of 9111.
4. Quote assumes a Situs State of FL. Hartford standard filed contract language applies unless approved in advance by Underwriting. State filings or specially drafted contract language is not assumed in the quoted rates.
5. Assumes employees must be actively-at-work on the effective date and the deferred effective date provision applies.
6. Assumes a fully insured, non-participating, non-dividend eligible funding arrangement, unless otherwise specified.
7. The enrolled census information must include coverage election amounts, and be within 10% of the census data used to develop this quote.
8. The Hartford reserves the right to re-price:
 - If the sold plan design differs from the proposed/quoted plan design
 - For change in State or Federal Insurance regulations
 - If a material misstatement of the information provided in the RFP, bid specifications, claim experience, or plan of benefits is discovered post-sale
 - If the quoted minimum enrollment threshold is not met
9. The Hartford reserves the right to change the plan to comply with state mandated benefits, including charging additional premium for such changes, if applicable.
10. If any contributory lines of coverage are sold, a 45-day Grace Period will apply to all lines of coverage. If only non-contributory lines of coverage are sold, a 31-day Grace Period will apply.

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11. The Minimum Life Benefit stated represents the minimum benefit before the application of Age Reduction Provisions
12. Quoted rates are based on all coverage lines being sold as a package.
13. We assume all eligible employees are U.S. citizens or U.S. residents, working in U.S. locations who have met the full time eligibility requirements. If coverage is needed for any other type of employees such as Expatriates, U.S. Expatriates, Third Country Nationals, or Local Nationals, please review the request with The Hartford.
14. Assumes claims incurred prior to the effective date of the contract will be the liability of the prior carrier.
15. Employees are required to complete Hartford Enrollment forms. All others must be approved by underwriting in advance.
16. Employees are required to complete Hartford Beneficiary designation forms. All others must be approved by underwriting in advance.
17. Late entrants are required to provide Evidence of Insurability to enter into the plan at any coverage level/amount.
18. All enrollment materials, which include enrollment forms and brochures, must be reviewed by Underwriting prior to the enrollment date. This includes material prepared by The Hartford or any other source.
19. Assumes the plan of benefits is subject to ERISA regulations.
20. Quote assumes 1 Contract/Booklet, 1 Bill Unit, and 1 Experience Unit.

The following Additional Underwriter Assumptions and Qualifications apply:

Please note the following deviations from the requested plan design:

Life

- Proposal includes Hartford Standard Accelerated Death Benefit.
- Proposal includes Hartford Standard AD&D Benefits.

This proposal is only a summary of the benefits offered to your company. The rates and costs shown in this proposal are based on the information provided. Rates may be affected by the actual enrollment and (transferred business information) provided.

This proposal does not constitute a final offer or agreement. It is the Producer's responsibility to present all terms and conditions in this proposal.

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Please note the following descriptions that further explain some of our benefits and features. The descriptions are based on our Standard Language. The benefits shown below are available in most states, however, please be aware that state variations may apply.

Life Insurance Plan:

Enhanced Employee

This language addresses concerns about employees losing coverage in takeover situations simply because the carrier changes. It is available when we are replacing a policy with Premium Waiver. Enhanced extends coverage to employees who were insured under the prior policy on the day before our Policy Effective Date, whether or not they were Actively at Work on that last day.

Coverage under this provision continues until the first of the following.

- The date the employee returns to work as an Active Full-Time Employee;
- The last day of a 12-month period following our Policy Effective Date;
- The last day the employee would have been covered under the prior policy had the prior policy not terminated; or
- The date insurance terminates for one of the reasons stated in the Termination Provisions.

The Amount of Coverage provided is equal to,

- The lesser of the amount under the prior policy or the amount under our policy
 - Reduced by any amount in force, paid or payable under the prior policy; or which would have been payable if timely election had been made.

Life Disability Provision

Premium Waiver to Normal Retirement Age, if Disabled Prior to Age 60

Any covered employee who becomes Disabled before age 60 is eligible for continued employee life insurance, without payment of premium, while the employee remains continuously Disabled. Premium is required until the employee is approved for coverage. Once approved, premium will be waived and coverage will be continued until Normal Retirement Age while the employee remains Disabled.

Employees are considered Disabled if they are prevented, by injury or sickness, from doing any work for which they are, or could become, qualified by education, training or experience. If Living Benefit Option is included, employees will also be considered Disabled if they meet the definition of Terminally Ill in the certificate.

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Living Benefit Option (Accelerated Benefit)

The Living Benefit Option (LBO) allows the employee to elect to receive an accelerated payment of a portion of the life insurance benefit when a covered person (may include employee or employee and dependent) is diagnosed as terminally ill with a 6, 12 or 24 month life expectancy. The employer determines applicable life expectancy and whether the benefit applies to dependent coverage.

We will pay up to 80% of the terminally ill individual's Group Term Life benefit as long as he or she has a minimum life coverage amount of \$10,000 and has not exceeded the maximum age, if any, described in the contract. LBO pays a minimum of \$3,000 and a maximum of \$500,000. Accelerated funds are paid to the employee with no restrictions on how they may be used; the remaining death benefit is then payable to the beneficiary.

Portability Plus

Portability allows employees to continue voluntary and/or basic life insurance protection for themselves and their families when the employee changes jobs. Portability Plus is included at no additional cost to the Employer. Terminated employees who elect Portability pay for the cost of this benefit.

Offered at group rates, this is an affordable way for many terminating employees to continue to be protected with life insurance. No medical exam is required and the employee may elect coverage continuation equal to 100 percent, 75 percent, or 50 percent of their current life insurance, subject to an overall maximum of \$250,000. Continued coverage of spouse and dependent children is also available, subject to maximum amounts of \$50,000 and \$10,000 respectively. This Portability option is available to all terminating employees who have not reached Normal Retirement Age, as defined by the 1983 Federal Social Security Act (generally age 65 or later, based on a graded scale). Coverage may continue to age 75 with a reduction at age 65 to 25 percent of the original amount.

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Life Settlement Options
Lump Sum Benefit
This option provides that the life insurance benefit proceeds will be paid to the beneficiary in a lump sum.
Safe Haven
<p>The Hartford's Safe Haven Program is available for group life or accidental death claim(s) of \$10,000 or more, which are payable to a single beneficiary. The beneficiary elects that the proceeds be distributed through the program in lieu of a lump sum check for the full death benefit amount.</p> <p>Safe Haven is intended to provide customers with a convenient means for paying immediate needs. This allows the beneficiary time to decide how to use the remaining balance of their insurance proceeds during a time when making financial decisions may be difficult. Proceeds are available to use right away to pay bills, make purchases, receive cash, reinvest or make other financial transactions. Here's how it works:</p> <ul style="list-style-type: none"> • The beneficiaries can write as many drafts each month as they wish, at anytime and for any reason — just as they might write a check. • The draft book can be used immediately for any expenses the beneficiaries incur and in any dollar amount — up to and including the full balance, plus interest. • Interest on the proceeds are compounded daily and credited to the account the last day of each month. The interest rate is determined by The Hartford. For interest earned equal to \$10 per year or greater, a form 1099-INT will be provided annually. • For accurate reporting, statements summarizing activity are mailed quarterly, or monthly if a new transaction other than earned interest posts to the account. • The Safe Haven Program does not charge any fees against the account. <p>Instead of contacting a traditional call center, each beneficiary is assigned his/her own personal representative. The representative will contact the beneficiary immediately upon claim payment to disclose the amount and expected delivery date. Alleviating a major stress point. And giving the beneficiary a key point of contact. The same representative will assist with all of the services Safe Haven offers.</p> <p>With Safe Haven, insurance proceeds are held in our general account and payments are based on the claims-paying ability of Hartford Life and Accident Insurance Company. The Hartford will earn investment income on Safe Haven assets. The difference between the investment income earned on the Safe Haven assets and the interest credited to customers participating in the Safe Haven program will provide Hartford with a profit and cover expenses we incur. The Hartford in its sole discretion determines the credited interest rate.</p> <p>Safe Haven is not intended to be a long-term investment vehicle. Safe Haven is not a bank account and as such, Safe Haven assets are not insured by the Federal Deposit Insurance Corporation. Nor are they backed or guaranteed by any federal or state government agency.</p>

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Standard Employee Continuity of Coverage

This language addresses continuation of employee coverage in takeover situations. Standard Continuity of Coverage extends coverage to employees insured under the prior policy, who were Actively at Work or on an authorized family or medical leave, on the day before our Policy Effective Date.

Coverage under this provision continues until the first of the following,

- the date the employee returns to work as an Active Full-Time Employee;
- the last day of a 12-month period following our Policy Effective Date;
- the last day the employee would have been covered under the prior policy had the prior policy not terminated; or
- the date insurance terminates for one of the reasons stated in the Termination Provisions.

The Amount of Coverage provided is equal to,

- The lesser of the amount under the prior policy or the amount under our policy
- Reduced by any amount in force, paid or payable under the prior policy; or which would have been payable if timely election had been made.

Suicide Exclusion

A Suicide Exclusion is included on Supplemental Life insurance for employees and dependents to help protect the employer's experience from unanticipated losses. It applies to coverage amounts that became effective within two years of the date of death, and the two year period includes the time coverage was in force under the prior group life policy.

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Stand Alone AD&D	
Under our Accidental Death and Dismemberment benefit, if any of the following losses result from an Injury sustained in an accident, and the loss occurs within 365 days of that accident, this personal accident plan will pay:	
For Loss of:	
Life	Principal Sum
Both Hands	Principal Sum
Both Feet	Principal Sum
Sight of Both Eyes	Principal Sum
One Hand and One Foot	Principal Sum
Speech and Hearing in Both Ears	Principal Sum
Either Hand or Foot and Sight of One Eye	Principal Sum
Either Hand or Foot	One-Half of Principal Sum
Sight of One Eye	One-Half of Principal Sum
Speech or Hearing in Both Ears	One-Half of Principal Sum
Thumb and Index Finger of Either Hand	One Quarter of the Principal Sum
<p>Loss means with regards to:</p> <ol style="list-style-type: none"> 1. hands and feet, actual severance through or above the wrist or ankle joints; 2. sight, speech and hearing, entire and irrecoverable loss thereof; 3. thumb and index finger, actual severance through or above the metacarpophalangeal joints <p>Injury means a bodily injury resulting directly and independently of all other causes from an accident. Loss resulting from sickness or disease, or medical or surgical treatment of a sickness or disease is not covered. The accident must occur while an insured is covered under the policy. We will not pay more than the Principal Sum for all losses due to the same accident.</p>	
<p>Exposure and Disappearance</p> <p>We will pay for a loss if an Insured is exposed to the elements because of a covered accident due to forced landing, stranding, sinking or wrecking of a conveyance in which the insured was an occupant at the time of the accident. We will presume an insured suffered a loss of life if his or her body has not been found within one year after a covered accident involving the disappearance of a conveyance in which the insured was an occupant at the time due to accidental forced landing, stranding, sinking or wrecking.</p>	

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Stand Alone AD&D Exclusions: What losses are not covered?	
The Policy does not cover any loss caused or contributed to by:	
1.	intentionally self-inflicted Injury;
2.	suicide or attempted suicide, whether sane or insane;
3.	war or act of war, whether declared or not;
4.	Injury sustained while on full-time active duty as a member of the armed forces (land, water, air) of any country or international authority;
5.	Injury sustained while On any aircraft except a Civil or Public Aircraft, or Military Transport Aircraft;
6.	Injury sustained while On any aircraft:
a.	as a flight instructor or examiner;
b.	being used for tests, experimental purposes, stunt flying, racing or endurance tests;
c.	if it is owned, operated or leased by or on behalf of the Policyholder, or any Employer or organization whose eligible persons are covered under The Policy; or
d.	as a pilot, crewmember or student pilot;
7.	Injury sustained while riding or driving in a scheduled race or testing any Motor Vehicle on tracks, speedways or proving grounds;
8.	Injury sustained while Intoxicated.

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AD&D Additional Benefits	
Accident Insurance can also help survivors of severe accidents adjust to new living circumstances. These optional benefits are available in most states.	
Adaptive Home and Vehicle Benefit	If an employee sustains an Injury, other than death, payable under the AD&D Benefit, this benefit pays an additional benefit for the one-time alteration cost to the injured person's principal residence; and/or private automobile; to make the residence accessible and/or the private automobile drive-able or ride-able for him or her. The costs must be incurred within two years from the date of accident. Pays the lesser of 5% of the Principal Sum or the actual cost of the alterations, subject to a maximum amount of \$5,000.
Child Education Benefit	If the employee or covered Spouse sustains an Injury that results in Loss of life payable under the AD&D Benefit, this benefit will pay for expenses incurred by his or her Dependent Children for their post high school education expenses. The expenses for Education will be paid on an annual basis for up to a maximum of four years. The benefit amount is the lesser of 20% of the employee's or covered spouse's Principal Sum up to a maximum of \$10,000. If no child qualifies for this benefit, a minimum of \$500 will be paid. Student means the employee's Dependent Child who is covered on the date of the employee's or covered spouse's death and is a full-time (at least 12 course credit hours per semester) post-high school student at an accredited institution of learning on the date of the employee's or covered spouse's death; or became a full-time (at least 12 credit hours per semester) post-high school student at an accredited institution of learning with 365 days after the employee's or covered spouse's death and was a student in the 12th grade on the date of the employee's or covered Spouse's death. Child(ren) means the employee or employee's Spouse's unmarried child, stepchild, legally adopted child, child in the process of adoption or foster child who is less than age 23 who regularly attends an accredited institution of learning; and is primarily dependent on the employee for financial support and maintenance.
Coma Benefit	If as a result of an Injury, an employee or covered Dependent becomes comatose within 31 days after a covered accident, and remains continuously comatose for a waiting period of 30 days, this benefit provides 1% of the Coma Maximum Benefit Amount for each month a person remains in a Coma. The Coma Maximum Benefit Amount equals the injured person's amount of Principal Sum, less all other payments under the Policy for the Injury. Coma means complete and continuous unconsciousness; and inability to respond to external or internal stimuli, as verified by a Physician.
Day Care Benefit	If the employee or covered Dependent sustain(s) an Injury that results in Loss of life payable under the AD&D Benefit, this benefit provides an annual child day care expense payment, for up to four years for each child. The eligible dependent must be under age 7 at the time of death. The child must be enrolled in a licensed day care program at the time of the accident or will be attending day care within 365 days following the accident. The benefit amount is 5% of the employee's or Spouse's Principal Sum up to a maximum of \$5,000. If no child qualifies, a minimum of \$500 will be paid.

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Rehabilitation Benefit	If an employee sustains an Injury which results in a Loss other than Loss of life, payable under the AD&D Benefit, this benefit provides an additional benefit for Rehabilitative Program Expenses Incurred within one year from the accident. Pays the lesser of 5% of the injured person's Principal Sum; or the actual cost up to a maximum of \$5,000. Rehabilitative Program means any training which is required due to the injured person's injury; and prepares the injured person for an occupation for which he or she was not previously trained. Expense Incurred means the actual cost of training and materials needed for the training.
Repatriation Benefit	If an employee or covered Dependent sustains an Injury which results in Loss of life, payable under the AD&D Benefit, this benefit provides an additional benefit for preparation and transportation of the body for cremation or burial occurring if the death occurs outside the territorial limits of the state or country of the deceased person's place of permanent residence. Pays the lesser of 5% of the injured person's Principal Sum; or the actual cost up to a maximum of \$5,000.
Spouse Education Benefit	If an employee sustains an Injury which results in Loss of life, payable under the AD&D Benefit, this benefit provides an additional benefit for Occupational Training to the employee's surviving Spouse that is covered under the policy. Pays the lesser of the Expense Incurred for Occupational Training or 5% of the employee's Principal Sum or the maximum of \$5,000. If no Spouse qualifies for this benefit, a minimum amount of \$500 will be paid. The Spouse must enroll in the Occupational Training for the purpose of obtaining an independent source of income; and within 1 year from the date of the employee's death. The expense must be incurred within 2 years of the date of the employee's death. Occupational Training means any education, professional or trade training program that prepares the spouse for an occupation for which they otherwise would not have qualified. Expenses Incurred means the actual tuition charged, exclusive of room and board; and the actual cost of the materials needed.
Therapeutic Counseling Benefit	If an employee sustains an Injury which results in a Loss other than Loss of life, payable under the AD&D Benefit, this benefit provides an additional benefit for Therapeutic Counseling due to the Loss. Services must begin within 90 days from the date of Loss and be incurred no later than 1 year from the date of Loss. Pays the lesser of 5% of the injured person's Principal Sum or the actual reasonable expense, subject to a maximum of \$5,000. Therapeutic Counseling means treatment or counseling provided by a licensed therapist or counselor registered or certified to provide psychological treatment or counseling.

Qualifications

A Concentration of Risk form must be completed or updated for all Life and AD&D lines with 1,000+ eligible employees at the time of sale.

Assumptions

We assume all eligible employees are U.S. citizens or U.S. residents working in U.S. locations or are Accepted International Employees.

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Accepted International Employees are:

- U.S. Expatriates (U.S. citizens employed by a U.S. company, who live and work outside the U.S. on temporary assignment) or
- Third Country Nationals (non-U.S. citizens employed by a U.S. company and who work in a country other than their own) or
- Canadian Local Nationals (Canadian citizens working in Canada), who have met the full time eligibility requirements, are paid on the U.S. payroll, and do not work in countries subject to sanctions programs administered by the US Department of the Treasury's Office of Foreign Assets Control (OFAC), Afghanistan, Algeria, Chad, Chechnia, Colombia, Democratic Republic of Congo, Iraq, Israel, Saudi Arabia, Somalia, Sudan (South of lat.10 deg. North), Japan, or the Canadian provinces of British Columbia, Manitoba, Newfoundland/Labrador, Northwest Territories, Nunavut, and Saskatchewan.

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Other:

Travel Assistance and ID Theft Protection

Travel Assistance & ID Theft Protection Services¹ Services include pre-trip information that helps employees feel safe and secure while traveling. It also gives them access to medical professionals across the globe for medical assistance when traveling 100+ miles away from home for 90 days or less when unexpected detours arise. Another important service is ID theft protection, available 24/7 whether home or away. Protection is provided two ways: Educational materials to help prevent identity theft. And access to caseworkers who can help victims resolve problems that result from identity theft.

This is a general description of the program. A more detailed explanation of the travel assistance and ID theft program, including exclusions and limitations, is available through your sales contact with The Hartford.

¹Travel Assistance and ID Theft Protection Services are provided by Europ Assistance USA. Europ Assistance is not affiliated with The Hartford and is not a provider of insurance services.

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Commissions and Other Payments to Producers

Note to Producers: We are changing the way that we administer flat commissions. Flat commissions will continue to be an alternative to graded commissions. For all proposals with a flat commission, the policyholder must receive the services listed in Schedule C or E of the 2015 Group Insurance Producer Agreement, which are available to you on our website <http://thehartford.com/group-benefits-producer-compensation> and on the Producer View website at www.ProducerView.com.

The Hartford compensates producers for the sale and service of our products. In most cases, producers are paid a Commission, which is either a graded or fixed flat percentage of the premium and is incorporated into the premium rate(s). In addition, producers may be eligible for various types of Other Payments. Other Payments are incurred as general operating expenses of The Hartford and will not be directly charged to any policy issued as the result of this quote.

Commissions and certain Other Payments are paid pursuant to the Hartford's Group Insurance Producer Agreement ("GIPA"). Quotes based on fixed or flat percentage Commissions reflect services provided by the producer to the policyholder. We rely on the producer to determine that these Commissions are supported by services described in the GIPA. The Hartford reports Commissions and Other Payments on the annual Schedule A Worksheet provided to policyholders in accordance with applicable law.

For additional information regarding eligibility for Commissions and Other Payments and terms and conditions relating thereto, please review our website <http://thehartford.com/group-benefits-producer-compensation> or contact your Hartford representative. Producers may also access the GIPA on Producer View.

Commissions

LIFE	This quote includes no commissions
LIFE STRM	This quote includes no commissions
ADD	This quote includes no commissions

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Policyholder Application Forms

http://gbd.thehartford.com/forms/pha/GroupLifeandLTDSTDFL_GR12100.pdf

This proposal explains the general purpose of the insurance described, but in no way changes or affects the policy as actually issued. In the event of a discrepancy between this proposal and the policy, the terms of the policy apply. All benefits are subject to the terms and conditions of the policy. Policies underwritten by the issuing companies listed above detail exclusions, limitations, reduction of benefits and terms under which the policies may be continued in full or discontinued. Complete details are in the Certificate of Insurance issued to each insured individual and the Master Policy issued to the policyholder. This program may vary and may not be available to residents of all states.

The Hartford® is The Hartford Financial Services Group, Inc. and its subsidiaries including issuing companies Hartford Life Insurance Company and Hartford Life and Accident Insurance Company. Home office is Hartford, CT.

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